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CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State*
DIVISION OF CORPORATIONS

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95 JUL 19 AM 10:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # 643014 (4)

1. Corporation Name
ATLANTIC-INTERNATIONAL COMPANY A FLORIDA U.S.A. CORPORATION

Principal Place of Business	Mailing Address
1913 STANFORD RD. JACKSONVILLE FL 32207	1913 STANFORD RD. JACKSONVILLE FL 32207

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/26/1979
3a. Date of Last Report: 06/28/1994

2. Principal Place of Business	2a. Mailing Address
21 2322 St. Charles Dr.	26 2322 St. Charles Dr.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Clearwater, Fl.	City & State 28 Clearwater, Fl.
Zip 24 34624 Country 25 Pinellas	Zip 29 34624 Country 30 Pinellas

4. FEI Number: 59-3113644 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ANTHONY, Y.L.
1913 STANFORD ROAD
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent

81 Name: William L. ATTEBERRY
82 Street Address (P.O. Box Number is Not Acceptable): 421 Belle Isle
83
84 City: Belleair Beach, FL 85 Zip Code: 34635

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: William L. Atteberry 7/12/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANTHONY, Y.L. 1913 STANFORD ROAD JACKSONVILLE FL (Deleted)	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☒ Change ☐ Addition President - Director Steven L. Livingston 3608 Hudson Lane Tampa, Fl. 33618
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HUSBANDS, LEE RT. 2, BOX 68-A RIVER RD CORDOVA AL (Deleted)	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☒ Change ☐ Addition Executive Vice President - Director William L. Atteberry 421 Belle Isle Belleair Beach, Fl. 34635
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HERBERT, JAMES E STAINES CENTRAL TRADING, ESTATES #18 STAINES, MIDDLESEX TW18 4XE UK (Deleted)	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☒ Change ☐ Addition Senior Vice President - Director Thomas J. Brown 2322 St, Charles Drive Clearwater, Fl. 34624
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Roger Glower 2007 Oakwood Avenue Tampa, Fl. 33605 (Deleted)	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an addition.

SIGNATURE: Steven L. Livingston May 18,1995 (813)286-7455
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

Steven L. Livingston

0406430 FP